

Executive Summary

Arizona's state agencies, community coalitions and substance abuse service providers depend on timely and accurate data to inform their decision-making processes and create effective policy. This document serves as a reference to develop an understanding of the impact of substance use in Arizona, including what progress has been made and what areas still require our diligent efforts.

Key findings are interspersed throughout the Substance Abuse Epidemiology Profile, some of which are noted below:

Mortality

- Drug and alcohol-related deaths, including those attributable to motor vehicle and boating fatalities, accounted for 1,689 deaths in Arizona in 2005.
- There have been significant increases in the number of alcohol and drug-induced deaths in Arizona; alcohol-induced deaths increased by 50% and drug-induced deaths more than doubled between 2000 and 2005.

Morbidity

- In 2005, there were 18,744 emergency room visits and 4,092 admissions to hospitals for alcohol or drug-related dependence, abuse or psychoses. Over 13,000 received publicly-funded substance abuse treatment.
- There were 34,859 arrests for driving under the influence in Arizona in 2005, a 16% reduction from 2002.
- National surveys show that alcohol abuse/dependence in Arizona increased by 50% between 2000 and 2005 (from 6.40% to 9.70%), while drug abuse/dependence decreased by 30% over the same time period (from 4.10% to 2.90%).
- One-third of high school students reported riding with someone who had been drinking alcohol in the last 30 days.

Consumption Patterns

- Substance use initiation occurs primarily between youths' 12th and 15th birthdays.
- Underage drinking cost Arizona approximately \$1.3 billion dollars in 2005.
- Almost half of Arizona's high school seniors reported drinking within the 30 days preceding the survey; a third reported binge drinking within the past 2 weeks.
- Approximately one quarter of Arizona adults reported binge drinking in the last 30 days.
- While substance use was found to be higher among older students, one exception was noted; a higher percentage of 8th grade students reported using inhalants than did 10th or 12th grade students.
- Arizona 10th grade students used methamphetamine in the 30 days preceding the survey at twice the national percentage (1.7% vs. 0.7%).

- There has been a decrease in both current and lifetime cigarette use among Arizona high school students during the last five years.
- There was a 20% decrease in youth reporting the use of marijuana in their lifetime (from 38.80% to 29.20%) from 2002 to 2006.

Consumption-Related Consequences

- Twenty percent of students in the 10th and 12th grades reported being drunk or high at school in the last 12 months.
- Arrests for drug possession increased from 2002 – 2005 for both juveniles and adults.
- Arrests for driving under the influence decreased by approximately 16% for both juveniles and adults between 2002 and 2005.
- The years between 2000 and 2005 saw a significant reduction in consequences related to methamphetamine use; Arizona saw a decrease in the number of labs seized, arrests made, prosecutions, victims, and disposal costs.
- Among Arizona Department of Economic Security's Families F.I.R.S.T. program participants, a higher percentage reported methamphetamine as their drug of choice than alcohol.
- Individuals aged 24 and younger and those aged 25 – 34 caused more alcohol-related accidents, injuries and deaths than people in other age groups.
- Gila and Pima counties had the highest rates of both emergency department visits and hospital admissions for drug abuse and dependence while Apache, Coconino and Navajo counties had the highest rates for alcohol dependence, abuse and psychoses.
- For Arizonans admitted to publicly-funded substance abuse treatment services, 12% of males and 21% of females reported methamphetamine as the primary substance they used in the 30 days preceding entry into the treatment program.
- American Indian/Alaskan Natives had the highest rates of hospital admissions for alcohol abuse, while Blacks/African Americans had higher rates of hospital admissions for drug dependence and drug abuse.

While many data gaps identified in the 2005 Substance Abuse Epidemiology Profile have been addressed, this profile indicates that important components of a complete data collection system remain in need of our attention: the development of an adult prevalence survey; an increased understanding of the economic and social costs of substance use; comprehensive resource assessments; data that examine the correlation between substance use and child welfare; and efforts to enhance data-collection capabilities on tribal lands.